STUDENT SCHOLARSHIP APPLICATION

First Presbyterian Church 709 South Boston Tulsa, OK 74119 Phone: 918-584-4701

Fax: 918-584-5233

Date of Application:			
Name of Applicant:		E-mail:	
Parent's Name:		E-mail:	
Address:			
Home Phone:	Work Phone:	Cell Phone:	
Event for which you are	e applying:		
Date(s) of Event:			
Cost of the Event	ost of the Event How much are you able to contribute?		
Total amount of assista	nce requested:	Remainder:	
Please list which fundro	nisers in which you have p	articipated:	
Please indicate why thi	s assistance is requested (and/or any extenuating circumstances	
which may apply:			